

MOSQUITO SURVEILLANCE LIGHT TRAP COLLECTIONS

For use of this form, see TB MED 561; the proponent agency is OTSG

1. DATE TRAP (S) SET		2. DATE SPECIMENS COLLECTED	3. COLLECTOR		
4. WEATHER DATA					
HIGH <i>a</i>		LOW <i>b</i>	RAINFALL <i>c</i>	WIND SPEED <i>d</i>	WIND DIRECTION <i>e</i>
5. TRAP NUMBER	6. NUMBER				7. COMMENTS
	MALES <i>a</i>	FEMALES <i>b</i>	NIGHTS <i>c</i>	FEMALES/NIGHT <i>d</i>	
SPECIMENS SENT TO USAEHA FOR ID					
8. DATE		9. SPECIES _____			
10. PESTICIDE TREATMENT DATA					
DATE <i>a</i>		PESTICIDE <i>b</i>			RATE <i>c</i>
11. METHOD OF APPLICATION					
12. AREA (S) TREATED					